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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

N/A CB

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

N/A CB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: [Signature] Initials: CB	WI	6	19	3

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## TITLE

Door latch

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